

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 2025-02	2 Total pages filed: 11	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mrs	FIRST Michelle	MI R	OFFICE USE ONLY Date Received 9:57 RECEIVED <i>L. Mendenhall</i> APR 25 2025 Office of City Secretary City of Sugar Land, TX
	NICKNAME	LAST Mikeska	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX:	APT / SUITE #:	CITY: STATE: ZIP CODE	
	[REDACTED] Sugar Land, TX 77478			
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	
	[REDACTED]			
6 CAMPAIGN TREASURER NAME	MS / MRS / MR Mrs	FIRST Vanessa	MI	
	NICKNAME	LAST Forse	SUFFIX	
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE):	APT / SUITE #:	CITY: STATE: ZIP CODE	
	[REDACTED] Missouri City, TX 77489			
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	
	[REDACTED]			
9 REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	
	<input type="checkbox"/> July 15	<input checked="" type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded Modified Reporting Limit	
10 PERIOD COVERED	Month	Day	Year	
	03	25	25	
11 ELECTION	ELECTION DATE	ELECTION TYPE		
	Month / Day / Year 05 / 03 / 25	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)		
		Mayor, City of Sugar Land		
14 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.			
	COMMITTEE TYPE	COMMITTEE NAME		
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS		
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		
	Additional Pages	COMMITTEE CAMPAIGN TREASURER ADDRESS		

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME Michelle R Mikeska		16 Filer ID (Ethics Commission Filers) 2025-02
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2325.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 2980.90
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 2726.52
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 7600.00

18 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Michelle Mikeska

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by _____ this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is Michelle Mikeska and my date of birth is [REDACTED]
 My address is [REDACTED] Sugar Land, TX, 77478 Fort Bend
(street) (city) (state) (zip code) (country)
 Executed in Fort Bend County, State of Texas, on the 24 day of April, 2025.
(month) (year)
Michelle Mikeska
 Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME Michelle R Mikeska		20 Filer ID (Ethics Commission Filers) 2025-02 2025-02
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2325.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 2980.90
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **6**

2 FILER NAME
Michelle R Mikeska

3 Filer ID (Ethics Commission Filers)
2025-02

4 Date
4/3/25

5 Full name of contributor out-of-state PAC (ID#: _____)
Adeel Akhtar

7 Amount of contribution (\$)
50.00

6 Contributor address; City; State; Zip Code
[REDACTED] **Sugar Land TX 77479**

8 Principal occupation / Job title (See Instructions)
Consultant

9 Employer (See Instructions)
Self

Date
4/3/25

Full name of contributor out-of-state PAC (ID#: _____)
Azeems Rehman

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
[REDACTED] **Katy TX 77494**

Principal occupation / Job title (See Instructions)
Realtor

Employer (See Instructions)
Century 21

Date
4/3/25

Full name of contributor out-of-state PAC (ID#: _____)
Sadaf Patel

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
[REDACTED] **Sugar Land TX 77479**

Principal occupation / Job title (See Instructions)
An-Nisa Hope Center

Employer (See Instructions)
Social Worker

Date
4/3/25

Full name of contributor out-of-state PAC (ID#: _____)
Aasif Syed

Amount of contribution (\$)
25.00

Contributor address; City; State; Zip Code
[REDACTED] **Sugar Land TX**

Principal occupation / Job title (See Instructions)
IT Support

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 6
2 FILER NAME Michelle R Mikeska		3 Filer ID (Ethics Commission Filers) 2025-02
4 Date 4/3/25	5 Full name of contributor out-of-state PAC (ID#: _____) Amjad Khokhar	7 Amount of contribution (\$) 25.00
	6 Contributor address; City; State; Zip Code [REDACTED] Missouri City TX 77459	
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Houston Lasik & Eye
Date 4/3/25	Full name of contributor out-of-state PAC (ID#: _____) Lubabah Abdullah	Amount of contribution (\$) 10.00
	Contributor address; City; State; Zip Code [REDACTED] Houston TX 77082	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 4/3/25	Full name of contributor out-of-state PAC (ID#: _____) Rozina Khan	Amount of contribution (\$) 20.00
	Contributor address; City; State; Zip Code [REDACTED] Richmond TX 77406	
Principal occupation / Job title (See Instructions) P LLC		Employer (See Instructions) Accountant
Date 4/3/25	Full name of contributor out-of-state PAC (ID#: _____) Armaghan Kamran	Amount of contribution (\$) 50.00
	Contributor address; City; State; Zip Code [REDACTED] Sugar Land TX 77479	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 6
2 FILER NAME Michelle R Mikeska		3 Filer ID (Ethics Commission Filers) 2025-02
4 Date 4/3/25	5 Full name of contributor out-of-state PAC (ID#: _____) Saba Umar	7 Amount of contribution (\$) 100.00
6 Contributor address; City; State; Zip Code [REDACTED] Richmond TX 77407		
8 Principal occupation / Job title (See Instructions) Case Worker		9 Employer (See Instructions) FBC
Date 4/3/25	Full name of contributor out-of-state PAC (ID#: _____) Iyad Muslet	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code [REDACTED] Richmond TX 77469		
Principal occupation / Job title (See Instructions) Berry		Employer (See Instructions) Manager
Date 4/3/25	Full name of contributor out-of-state PAC (ID#: _____) Afshan Jilani	Amount of contribution (\$) 20.00
Contributor address; City; State; Zip Code [REDACTED] TX 77379		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/3/25	Full name of contributor out-of-state PAC (ID#: _____) Shadab Shaikh	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 5826 New Territory Blvd, 826 Sugar Land TX 77479		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 6
2 FILER NAME Michelle R Mikeska		3 Filer ID (Ethics Commission Filers) 2025-02
4 Date 4/3/25	5 Full name of contributor out-of-state PAC (ID#: _____) Uzair Ahmed	7 Amount of contribution (\$) 50.00
6 Contributor address; City; State; Zip Code [Redacted] Stafford TX 77477		
8 Principal occupation / Job title (See Instructions) Sr		9 Employer (See Instructions) Transtech Energy
Date 4/3/25	Full name of contributor out-of-state PAC (ID#: _____) Waqar Mehmood	Amount of contribution (\$) 25.00
Contributor address; City; State; Zip Code [Redacted] Sugar Land TX 77479		
Principal occupation / Job title (See Instructions) Business Lead		Employer (See Instructions) Texas Instruments
Date 4/3/25	Full name of contributor out-of-state PAC (ID#: _____) Aisha Jalali	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code [Redacted] Sugar Land TX		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/3/25	Full name of contributor out-of-state PAC (ID#: _____) Kailab LLC	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code [Redacted] Sugar Land TX 77479		
Principal occupation / Job title (See Instructions) Kailab LLC		Employer (See Instructions)

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Reset Form

Reset Page

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 6
2 FILER NAME Michelle R Mikeska		3 Filer ID (Ethics Commission Filers) 2025-02
4 Date 4/3/25	5 Full name of contributor out-of-state PAC (ID# _____) Afshan Jilani	7 Amount of contribution (\$) 10.00
	6 Contributor address; City; State; Zip Code [REDACTED] TX 77379	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4/8/25	Full name of contributor out-of-state PAC (ID# _____) James Aylsworth	Amount of contribution (\$) 500.00
	Contributor address; City; State; Zip Code [REDACTED] Sugar Land TX 77479	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/14/25	Full name of contributor out-of-state PAC (ID# _____) Ozraa Dhanani	Amount of contribution (\$) 50.00
	Contributor address; City; State; Zip Code [REDACTED] Sugar Land TX	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Dhanani & Gilani Mediation
Date 4/14/25	Full name of contributor out-of-state PAC (ID# _____) Nishaat Munshi	Amount of contribution (\$) 65.00
	Contributor address; City; State; Zip Code [REDACTED] Sugar Land TX	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Michelle R Mikeska		3 Filer ID (Ethics Commission Filers) 2025-02
4 Date 4/14/25	5 Full name of contributor out-of-state PAC (ID#: _____) Alyssa Mische 6 Contributor address; City; State; Zip Code [REDACTED] Sugar Land TX 77479	7 Amount of contribution (\$) 325.00
8 Principal occupation / Job title (See Instructions) Martial Arts Instructor		9 Employer (See Instructions) Fit & Kick
Date 4/16/25	Full name of contributor out-of-state PAC (ID#: _____) Tina Chadha Contributor address; City; State; Zip Code [REDACTED] Houston TX 77024	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/23/25	Full name of contributor out-of-state PAC (ID#: _____) Shazia Sultan Contributor address; City; State; Zip Code [REDACTED] Houston TX 77027	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 2	2 FILER NAME Michelle R Mikeska	3 Filer ID (Ethics Commission Filers) 2025-02
4 Date 3/31/25	5 Payee name FCCU	
6 Amount (\$) 10.00	7 Payee address, City, State, Zip Code [REDACTED] Sugar Land, TX 77478	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Account Maintenance Fee
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 4/14/25	Payee name M3 Graphics	
Amount (\$) 703.63	Payee address, City, State, Zip Code [REDACTED] Houston, TX 77099	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Signs
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 4/14/25	Payee name M3 Graphics	
Amount (\$) 529.32	Payee address, City, State, Zip Code 11730 S Wilcrest Dr, Houston, TX 77099	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Push Cards
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 2	2 FILER NAME Michelle R Mikeska	3 Filer ID (Ethics Commission Filers) 2025-02
4 Date 4/14/25	5 Payee name Home Depot	
6 Amount (\$) 200.84	7 Payee address; City; State; Zip Code 15505 SW FWY, Sugar Land, TX 77478	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Sign Materials
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 4/22/25	Payee name Innovative Solutions IT	
Amount (\$) 1537.11	Payee address; City; State; Zip Code 10862 Redstone Ct, Missouri City, TX 77459	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Tshirts, Business Cards, Push Cards
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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